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CENTRALTAXICENTER

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named

Inventor:

Nisheth P. Joshi

Appln. No.:

10/727,258

Filed : December 3, 2003

For

: BUSINESS DATA MIGRATION USING METADATA

Docket No.:

M61.12-0563

Group Art Unit: 2162

Examiner: Cam Truong

### REQUEST FOR INTERVIEW

VIA FACSIMILE: 571-273-8300

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir:

Applicant believes that a telephone conference with the Examiner at this point in time may help to advance the present case toward allowance. Accordingly, Applicant hereby respectfully requests the privilege of an interview. In that regard, Applicant respectfully requests that the Examiner contact the undersigned (Christopher L. Holt) to arrange a date and time for a phone conference. If the Examiner is not inclined to conduct an interview at this time, Applicant respectfully requests that the undersigned be contacted and informed that this is the case. The undersigned can be reached at (612) 852-0600 during normal business hours (central time zone).

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

By: Christopher L. Holt, Reg. No. 45,844

900 Second Avenue South, Suite 1400

Minneapolis, Minnesota 55402-3319

Phone: (612) 334-3222 Fax: (612) 334-3312

CLH:rkp

#### RECEIVED CENTRALIFAX CENTER

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### INTERVIEW AGENDA

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir:

VIA FACSIMILE: 571-273-8300

During the phone conference, Applicant would like to discuss the following issues:

- Applicant would like to discuss if the Examiner would allow independent claim 1 1. if the elements of dependent claim 4 was added.
- Applicant would like to discuss whether independent claim 20 would be allowable 2. if the elements of dependent claims 25, 27, 29 and 30 were added.
- If the Examiner is not satisfied with the proposed combinations of claims, then Applicant would like to discuss the Examiner's ideas in terms of allowable 3. claim combinations.

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

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**CLH z**kp